

HP LaserJet 3200



LAW OFFICE OF JAMES MARC LEAS
802-864-9319
OCT-23-2003 9:33AM

Fax Call Report

Job	Date	Time	Type	Identification	Duration	Pages	Result
876	10/23/2003	9:25:51AM	Send	17038729319	7:52	22	OK

EXPEDITED PROCEDURE

RESPONSE UNDER 37 CFR § 1.116—EXAMINING GROUP 2859

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of: Townsend, et al
Application No.: 10/082,562
Filing Date: February 23, 2002
Title: Posture and Body Movement
Measurement System

Docket No. 115-002
Date: October 21, 2003
Group Art Unit: 2859
Examiner: Amy Cohen
Fax: 703 308-7722
Phone: 703 305-4971

Fax To: 872-1319

Amendment Under 37 CFR 1.116

Amendment B

Assistant Commissioner of Patents
Washington, D.C. 20231

Sir:

This is in response to the final office action dated July 23, 2003. A fee for additional dependent claims is due by virtue of this amendment. A fee sheet and credit card form are attached.

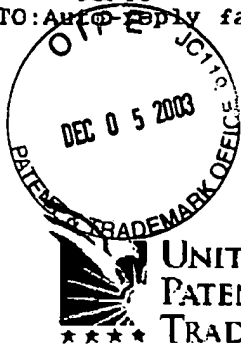
CERTIFICATE OF MAILING	
I hereby certify that, on the date shown below, this correspondence is being:	
<input checked="" type="checkbox"/> MAIL to be deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Assistant Commissioner of Patents Washington, DC 20231 Date: <u>10/23/03</u>	<input type="checkbox"/> FACSIMILE transmitted by facsimile to the Patent and Trademark Office <div style="text-align: center;"> <u>James H. Lane</u> Name <u>James H. Lane</u> Signature </div>

115-002

Page 1 of 22

10/082,562

USPTO 10/23/03 9:32 PAGE 1/1 RightFAX
TO: Auto-Reply fax to 802 864 9319 COMPANY:



Auto-Reply Facsimile Transmission

UNITED STATES
PATENT AND
TRADEMARK OFFICE
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TO: Fax Sender at 802 864 9319
Fax Information
Date Received: 10/23/03 9:25:40 AM [Eastern Daylight Time]
Total Pages: 22 (including cover page)

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CCT 23 2003 9:26AM		LAW OFFICE OF JAMES MARC		802-864-9319		P.1	
EXPEDITED PROCEDURE							
RESPONSE UNDER 37 CFR § 1.116-EXAMINING GROUP 2851							
PATENT							
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE							
In re the Application of: Townsend, et al				Docket No. 115-002			
Application No.: 10082,562				Date: October 21, 2003			
Filing Date: February 23, 2002				Group Art Unit: 2855			
Title: Posture and Body Movement Measurement System				Examiner: Amy Cohen			
				Fax: 703 305-7722			
				Phone: 703 305-4973			
Fax To: 872-1319							
Amendment Under 37 CFR 1.116							
Amendment B							
Assistant Commissioner of Patents Washington, D.C. 20231							
Sir:							
This is in response to the final office action dated July 23, 2003. A fee for additional dependent claims is due by virtue of this amendment. A fee sheet and credit card form are attached.							
CERTIFICATE OF MAILING I hereby certify that, on the date shown below, the foregoing document is being:							
MAIL: <input type="checkbox"/> Delivered with the United States Postal Service with sufficient postage as the document is an original copy issued for Applicant's Correspondence in Patent Washington, DC 20231. Date: 10/23/03				FACSIMILE: <input checked="" type="checkbox"/> Transmitted by facsimile to the Patent and Trademark Office. James H. Lewis By: [Signature] Examiner			
115-002		Page 1 of 22		10082,562			
Accepted by: [Signature] 10/23/03 10:10 AM [Eastern Daylight Time]							

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LAW OFFICE OF JAMES MARC LEAS
802-864-9319
OCT-23-2003 10:05AM

Fax Call Report

Job	Date	Time	Type	Identification	Duration	Pages	Result
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file

EXPEDITED PROCEDURE

RESPONSE UNDER 37 CFR § 1.116-EXAMINING GROUP 2859

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of: Townsend, et al
Application No.: 10/082,562
Filing Date: February 23, 2002
Title: Posture and Body Movement
Measurement System

Docket No. 115-002
Date: October 11, 2003
Group Art Unit: 2859
Examiner: Amy Cohen
Fax: 703 308-7722
Phone: 703 305-4972

Amendment Under 37 CFR 1.116 **Fax 703 872-7319**

Amendment B

Assistant Commissioner of Patents
Washington, D.C. 20231

Sir:

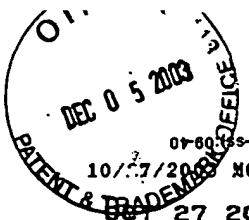
This is in response to the final office action dated July 23, 2003. A fee for additional dependent claims is due by virtue of this amendment. A fee sheet and credit card form are attached.

CERTIFICATE OF MAILING	
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<input type="checkbox"/> deposited with the United States Postal Service with sufficient postage as first class mail, or in some other addressee to: Assistant Commissioner of Patents Washington, DC 20231. Date: <u>10/23/03</u>	<input checked="" type="checkbox"/> transmitted by facsimile to the Patent and Trademark Office. <u>James M. Leas</u> Name <u>James M. Leas</u> Signature

115-002

Page 1 of 22

10/082,562



10/27/2003 MON 18:42 FAX 802 863 4093 MicroStrain, Inc.

PAGE 26/29 - RCVD AT 12/4/2003 3:33:13 PM [Eastern Standard Time] - SVR:USPTO-EFAX-F-1/5 - DNSIS:8729319 - CSID:802 864 9319 - DURATION (mm:ss) 00:40

DEC 27 2003 6:31PM

LAW OFFICE OF JAMES MARC

802-864-9319

P. 1

Handwritten: **Handwritten was faxed to PTO on 10/23/03**
Approved for use through 07/31/2006. OMB 0451-0002
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2004 <small>Effective 10/01/2003. Patent fees are subject to annual revision.</small>		Complete if Known	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/022,562
TOTAL AMOUNT OF PAYMENT (\$)		Filing Date	12/3/03
63		First Named Inventor	Townsend
		Examiner Name	AMY C. HAN
		Art Unit	2859
		Attorney Docket No.	11A-002

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)	
<input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None		3. ADDITIONAL FEES	
<input type="checkbox"/> Deposit Account		Large Entity - Small Entity	
Deposit Account Number: _____			
Deposit Account Name: _____			
The Director is authorized to: (check all that apply)			
<input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Credit any overpayments			
<input type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s)			
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.			
FEE CALCULATION			
1. BASIC FILING FEE			
Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 365	Utility filing fee	
1002 340	2002 170	Design filing fee	
1003 630	2003 265	Plant filing fee	
1004 770	2004 365	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1) (\$)			
63			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE			
Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	2	9	63
Multiple Dependent			
Large Entity - Small Entity			
Fee Code (\$)	Fee Code (\$)	Fee Description	
1202 18	2202 0	Claims in excess of 20	
1201 86	2201 43	Independent claims in excess of 5	
1203 290	2203 145	Multiple dependent claims, if not paid	
1234 66	2204 43	Reissue independent claims over original patent	
1236 18	2205 0	Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2) (\$)			
63			
*or number previously paid, if greater, for Reissues, see above			
Other fee (specify):			
*Reduced by Basic Filing Fee Paid			
SUBTOTAL (3) (\$)			
63			

SUBMITTED BY		(Complete if applicable)	
Name (print/type)	James H. Lee	Registration No. (Attorney/Agent)	34372
Signature	<i>James H. Lee</i>	Telephone	802 864 1575
		Date	10/27/03

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to be (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS.

SEND TO: Commissioner for Patents, P.O. Box 1454, Alexandria, VA 22313-1454.

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802-864-9319
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Fax Call Report

Job	Date	Time	Type	Identification	Duration	Pages	Result
888	10/27/2003	6:51:23PM	Send	17038729319	1:25	2	OK

10/27/1993 MON 10:42 FAX 801 863 4883 MicroStrain, Inc.

WASE/002

007 07 0003 8:31PM LAW OFFICE OF JAMES HART 002-064-8310

Fig. 2

Investigations faxed to PTO on 10/23/2011

[illegible]

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UNITED STATES
PATENT AND
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TO:

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Fax Information

Date Received:

10/27/03 5:51:36 PM [Eastern Standard Time]

Total Pages:

2 (including cover page)

ADVISORY: This is an automatically generated return receipt confirmation of the facsimile transmission received by the Office. Please check to make sure that the number of pages listed as received in Total Pages above matches what was intended to be sent. Applicants are advised to retain this receipt in the unlikely event that proof of this facsimile transmission is necessary. Applicants are also advised to use the certificate of facsimile transmission procedures set forth in 37 CFR 1.8(a) and (b), 37 CFR 1.6(f). Trademark Applicants, also see the Trademark Manual of Examining Procedure (TMEP) section 306 et seq.

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OCT 27 2003 8:51PM LAW OFFICE OF JAMES HARC 802-864-9319 P.1
10/27/2003 12:41 FAX 002 864 9319 (002) MicroScale, Inc. 10/27/2003
OCT 27 2003 8:51PM LAW OFFICE OF JAMES HARC 802-864-9319 P.1

Handwritten: Handwritten notes to PTO re 10/27/03

FEE TRANSMITTAL for FY 2004

U.S. Patent and Trademark Office, U.S. Department of Commerce
1600 Constitution Avenue, N.W., Washington, D.C. 20543-0001

Applicant Name: MicroScale, Inc.
Filing Date: 10/27/03
Firm Name: James HARC
Inventor Name: James HARC
Applicant Address: 1000 1st St
City: St. Louis
State: MO
Zip: 63102

TOTAL AMOUNT OF PAYMENT: \$1,000.00

METHOD OF PAYMENT (check one)
☐ Check ☐ Money Order ☐ Credit Card ☐ Other

1. BASIC FILING FEE

Code	Fee	Description	Fee Paid
001	775	Initial filing fee	
002	150	Search fee	
003	150	Examination fee	
004	150	Publication fee	
005	150	Post-grant fee	
006	150	Reexamination fee	
007	150	Continuation fee	
008	150	Continuation-in-part fee	
009	150	Divisional fee	
010	150	Reissue fee	
011	150	Correction fee	
012	150	Amendment fee	
013	150	Extension fee	
014	150	Other fee	

2. EXTRA CLAIM FEE (PER CLAIM) AND ADDITIONAL FEE

Code	Fee	Description	Fee Paid
015	150	Extra claim fee (per claim)	
016	150	Additional fee (per claim)	
017	150	Other fee (per claim)	

3. ADDITIONAL FEES

Code	Fee	Description	Fee Paid
018	150	Examination fee (per claim)	
019	150	Search fee (per claim)	
020	150	Publication fee (per claim)	
021	150	Post-grant fee (per claim)	
022	150	Reexamination fee (per claim)	
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024	150	Continuation-in-part fee (per claim)	
025	150	Divisional fee (per claim)	
026	150	Reissue fee (per claim)	
027	150	Correction fee (per claim)	
028	150	Amendment fee (per claim)	
029	150	Extension fee (per claim)	
030	150	Other fee (per claim)	

4. TOTAL FEE

\$1,000.00

5. REMARKS

Handwritten: Handwritten notes to PTO re 10/27/03

6. SIGNATURE

James HARC

7. DATE

10/27/03

8. FILING OFFICE

St. Louis

9. FILING DATE

10/27/03

10. FILING TIME

12:41

11. FILING METHOD

FAX

12. FILING STATUS

Initial filing

13. FILING TYPE

Utility

14. FILING CLASS

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15. FILING SUBCLASS

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16. FILING CLASS AND SUBCLASS

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